

# GARNISHMENT PRONGFILE FAX COVER SHEET

After the Field Office completes the COGS input, complete this form and fax it along with a copy of the entire garnishment order for **PRONGFILE-NO ACTION NECESSARY** into the paperless fax number of the jurisdictional Processing Center. Hold the original garnishment order for 120 days and then destroy. **Do not send the original order to the PC. Do not include MBRs, PHUS or other queries with your fax.**

DATE OF FAX \_\_\_/\_\_\_/\_\_\_ NUMBER OF PAGES \_\_\_\_\_

NUMBER HOLDER SOCIAL SECURITY NUMBER \_\_\_\_\_

(Show the SSN of the NH which may not be the SSN of the person being garnished, i.e., auxiliary or survivor)

TO: PROCESSING CENTER (PC) [Check a current MBR for PC jurisdiction]:

PC1 Paperless Fax # (718) 557-5777

PC2 Paperless Fax # (215) 597-5111

PC3 Paperless Fax # (205) 801-3000

PC4 Paperless Fax # (312) 596-0950

PC5 Paperless Fax # (510) 236-8947

PC6 Paperless Fax # (816) 936-5470

PC7 Paperless Fax # (410) 597-0939

PC8 Paperless Fax # (410) 597-1800

FROM: FIELD OFFICE (FO) CODE \_\_\_\_\_

FO EMPLOYEE CONTACT \_\_\_\_\_

FO CONTACT PHONE NUMBER \_\_\_\_\_